**3** APR 1968

# MEMORANDUM FOR THE RECORD

SUBJECT: Briefing on the Clinical Division/OMS 28 March 1968 - 1500 Hours

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and comme		s, breakdowns of l Division's acti		fs, workload charts	-
and activit	setting up of a Spe	is designed to the designed to the design in	ake up some of the Director for Me	resulted in the ties, in the person e routine problems dical Services, and useful addition to	25
believes the He spoke of	As far as the Clinnat he has an effect of the difficulty in a ch limits payment	ive mix of staff reimbursing goo	and WAE/Consult d men adequately	under the present	25
Departmen	nt, for one, pays m he \$45 to \$50 range	nore and		ke to see this figure	25
	Workload figures spensary. At the simmunization	same time the H		the Headquarters unization facility	25
that these	to more efficient a	and speeded up of in the form of re	perations and	al equipment that suggested cipation of possible	25
7.	The briefing adjou	irned at 1600.			25
			Special Assista		
Distributio	on: Po Set Fige Release DD/S Chrono	2003/05/ <del>05</del> : CH	Deputy Director  -RDR84-00780R00  declarsif	24.001 0042-3	

GENERAL BRIEFING OUTLINE

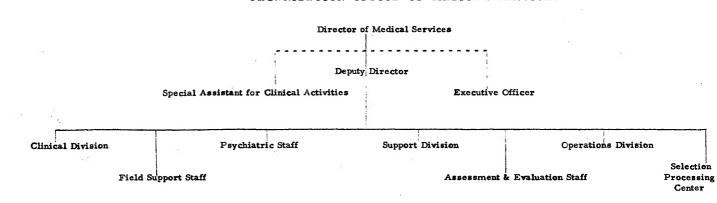
CLINICAL DIVISION
OFFICE OF MEDICAL SERVICES

March 1968

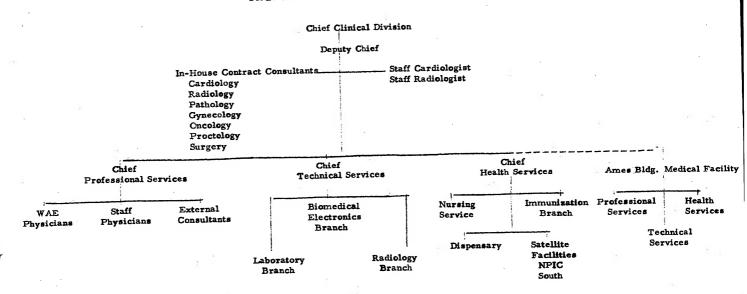
Approved For Release 2003/05/05 : CIA-RDP84-00780R002100110042-3 Special As Clinical Division Field Support Staff

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### CRGANIZATION OFFICE OF MEDICAL SERVICES



## ORGANIZATION CLINICAL DIVISION



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### FUNCTIONS

### PROFESSIONAL STAFF

#### Chief, CD

Administer CD Liaison with organized medicine Other government medical services Medical Societies Public Health Liaison with Agency components Supervise CD projects Occupational medicine Environmental health Advisor EAA **GEHA** BSD Safety Committee

#### Deputy Chief, CD

Maintain logs and records
Disease incidence studies
Overseas medical support
Supervise professional personnel

## Chief, Professional Services

Conduct clinical evaluations and disqualifications
Supervise WAE physicians
Perform special examinations
Medical retirement
Fitness for duty
Return to duty
Cther
Maintain liaison with cleared
consultants
Monitor serious illnesses
Headquarters personnel
Treatment and counsel

### Staff Cardiologist

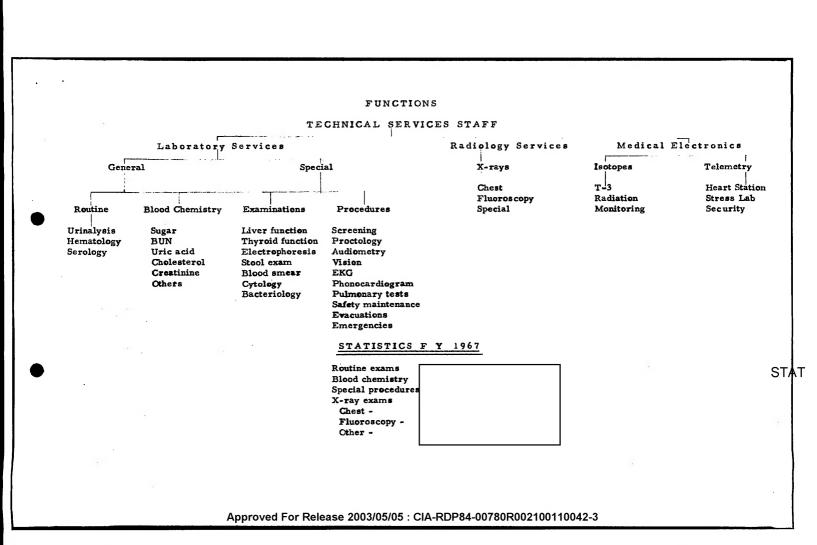
Executive annual program
Research
Cardiac
EKG
Stress
Treatment & counsel

## Staff Radiologist

Interpret x-rays
Perform specialized x-ray
examinations
Gastrointestinal
Cardiac
IVP
Mammograms
Barium enemas

#### FUNCTIONS HEALTH SERVICES STAFF NURSING SERVICES DISPENSARY SERVICE SATELLITES IMMUNIZATION SERVICE General Special Emergency care NPIC Overseas Injections South Bldg. Medical clearances Medical screening Evacuations Immunization programs Other: Monitor sick leave Health inspections diathermy influenza Health counselling Occupational nursing Follow-up care Building emergencies special treatment Prophylaxis Medical referrals quiet rooms gamma globulin Assist physicians pharmacy drugs aralen supplies records Visiting nurse service STATISTICS F Y 1967

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## CLINICAL DIVISION ACTIVITIES (continued)

#### III. MAINTAIN A PREVENTIVE MEDICAL PROGRAM

### A. Immunization and Prophylaxis

Overseas immunizations Malaria prophylaxis Hepatitis prophylaxis

#### B. Advice to Employees

Environmental hazards
Hygiene counselling
Educational programs
Personal problems

### C. Examination Programs

Executive annual program
Periodic health examinations
Special examinations

### IV. CLINICAL SUPPORT FOR OVERSEAS

### A. Overseas Personnel

Qualified facilities
Direct advice
Travel kits
Briefing in conjunction with Psychiatric Staff

#### B. Medical Evacuations

Arrange treatment

#### C. Dependent Program

Briefing Commo. wives in conjunction with Psychiatric Staff

#### D. Overseas Physicians and Technicians

## CLINICAL DIVISION ACTIVITIES (continued)

### V. CONDUCT A RESEARCH AND DEVELOPMENT PROGRAM

A. Medical Electronics

Telemetric systems
Biotronics new system

B. EKG Analysis

Transmission Duplication Analytic methods

C. Automatic Data Processing

Code development Systems development

D. Disease incidence analysis

Sick leave analysis Overseas illnesses Epidemiology Hospitalizations

E. Studies on Stress and Aging

Will be aided by machine readable information

### VI. TRAINING ACTIVITIES

A. In House

Rotation Lectures Demonstrations

B. External

Special courses Medical meetings

#### VII. SUPPORT AGENCY ACTIVITIES

A. Medical Advisor

GEHA EAA BSD

B. Professional Assistance

Immunization programs
Community efforts
Personnel problems

#### CURRENT AND PLANNED OPERATIONS

- 1. Executive Annual Program
  - a. Tonometry to be done by two of our staff nurses.b. Spirometry
- EKG Program
  - a. Computer interpretation of routine and polygraph data.
- 3. Eventual plan to have computerized interpretation of spirograms.
- Plan to convert analog signals of autoanalyzer and spirograms to digital readouts. Program to place AMH, physical findings, laboratory data, diagnoses, physician recommendations, and final disposition
  - in machine readable form. In-house training program to be set up
- 6. 7. Medical standards
- 8. SOP Manual
- 9. Clinical Division Panel
- 10. Periodic preventive medical programs to provide immunizations against smallpox, tetanus, influenza, tetanus-diphtheria and polio.

#### REQUIREMENTS

- 1. Equipment
  - a. Spirometry and EKG equipment that provides signals which are better for computer interpretation.
  - b. Current with medical advances.
- 2. More monies for WAE physicians and external consultants. Requested in this year's Program Call for 1970 but we could use it now.
- 3. Space
- Training

  - a. In-house as currently planned
    b. More exposure to Agency training and briefings
  - c. External greater attendance of professional meetings and courses.
- 5. Full strength of physicians and technicians in Clinical Division.

#### AREAS FOR IMPROVEMENT

- 1. Regularly scheduled examinations for all WAE physicians.
- 2. Opportunity for overseas travel for Clinical Division physicians.
- 3. Opportunity for individual clinical studies by Clinical Division physicians.
  - a. Clinical review of health problems for publication.
  - Comprehensive review of overseas medical problems to determine what additional changes need be made in overseas selection criteria.
  - c. In-depth review of retirement cases and problem cases to determine what, if any, adjustments need be made in selection standards.
- 4. Visiting surse for overseas evacuees.
- Improvement of career program with goals of better career service to Agency and providing better continuity of professional staff, particularly physicians, in Clinical Division.